



Equipment Parse Request

Department: _____

Department Head (Print): _____

Department Head (Sign): _____

Item: _____

Brand: _____ Model: _____ Quantity: _____

Does this item belong to your department? Yes No (circle one)

Description: _____

Starting Bid: _____

Reserve: _____

Do you have digital pictures of this item? Yes No (circle one)

Your Name: _____

Your Signature: _____

* This form gives consent to the Alexander County Finance department to auction the item(s) listed above. If you are unsure of any details or have questions... please contact cmayberry@alexandercountync.gov or call (828) 632-4591